	276274 ACCEPTED
Caption of Case) xample: Application for a Class C Charter Certificate from	BEFORE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA TRANSPORTATION COVER SHEET DOCKET
John Doe dba Doe's Limo) 2599)	TRANSPORTATION COVER SHEET
)	NUMBER: 2018 - 172 - T
))	have filed with the Commission before, a Docket Number was assigned and should be entered above.
ubmitted by: Millie Llayd	Telephone: 843-774-0953
ddress: 4216 Sinclair Rd.	Fax:
Dillon SC 29536	Other: <u>Cell-843-845-1959</u> Sp.
	Email: MILOYdir540 gmail-Com
OTE: The cover sheet and information contained herein neither replace required by law. This form is required for use by the Public Service Confiled out completely. NATURE OF ACTION	Commission of South Carolina for the purpose of docketing and must 80 Willoydyr 540 gamail. Co
Application - Class A/A Restricted	Request for Name Change on Certificate
Application - Class C Taxi	Request to Amend Scope of Authority
Application - Class C Charter	Request to Amend Tariff (rate increase, etc.)
Application - Class C Charter Bus	Request to Amend Passenger Limit
Application - Class C Non-Emergency	Request F
Application - Class C Stretcher Van	Exhibit Lote Filed Exhibit
Application - Class E Household Goods	Late-Filed Exhibit 🥻 🏺 💟
Application - Class E Hazardous Waste	Letter
Application	Proposed Order
Request for Extension to Comply with Order	Publisher's Affidavit
Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded	Reservation Letter Response
Request for Cancellation of Certificate Request for Suspension	Return to Petition
Request for Suspension	Other:
Request for Reinstatement	

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PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

101 Executive Center Drive, Suite 100

Columbia, South Carolina 29210

(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100

Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

•	•
CLASS C - NON-EMERGENCY Date	: 4- 19- 2018
	•
Application is hereby made for a Certificate of Public Convenience and Ne of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.	ecessity, in accordance with the provision
1. Name under which business is to be conducted (corporation, partnership, or so	
Millie Lloyd dba. Lloyd's Ira	nsport Services
Millie Lloyd dba. Lloyd's Tra 4216 Sinclair Rd. Dillon SC. Street Address of Applicant	29536
Street Address of Applicant	X 1 5 5 F
Mailing Address of Applicant (if different from	street address)
-843-774-0953-Cell-843-845-1959	
LHOIR .	Fax
Vy/10/djr 540 gnail. Com Email Address	
Email Address	·
2. If the Applicant is an LLC or a corporation, a copy of the Certificate of E Secretary of State and the Articles of Incorporation must be attached. (If in Carolina Secretary of State "Foreign Corporation" Certificate.)	
3. Select Entity Type: (Check one)	
Individual Owner/Sole Proprietorship	
Partnership - List names and address of all person having an intere	st in the business.
Corporation - List names and addresses of two principal officers.	•
	

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Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

Financial Statement

Applicant's assets and liabilities are as follows:

Assets:		<u>Liabilities:</u>	
Value of Real Estate	\$50,000.00	Mortgage/Loan on Real Estate	
Value of Motor Vehicles	\$60,000.00	Loans Owed on Motor Vehicles \$45,000.	
Cash on Hand	\$2000.00	Business/Other Loans Owed	
Cash in Bank	\$ 2000.00	Other Liabilities or Debts 9 6500.40	
Value of Other Assets and Equipment	\$65,000.00	Total Liabilities 151,500.00	
Total Assets	\$ 179,000,00		

INSTRUCTIONS:

- 1. "Value of Real Estate" means the actual or estimated market value of any real property/buildings owned by the Company/Business Applying for a Certificate.
- 2. "Mortgage/Loan on Real Estate" means the outstanding balance on any Mortgage, Equity Line or other Loan secured by the Real Estate listed in Item 1.
- "Value of Motor Vehicles" means the actual or fair estimated value of any moving vans, trucks or other vehicles owned by the Company/Business Applying for a Certificate.
- 4. "Loans Owed on Motor Vehicles" means the outstanding balance on any loans or liens on the vehicles listed in Item 3.
- 5. "Cash on Hand" is the total of actual cash held by the Company/Business applying for a Certificate on the day this form is filled out.
- 6. "Business/Other Loans Owed" means the outstanding balance on any small business loan or other unsecured loan made by a person, bank or business to the Business/Company applying for a Certificate.
- 7. "Cash in Bank" means the current balance in checking accounts, savings accounts or the like in the name of the Company/Business applying for a Certificate. Do not include retirement accounts or personal bank account balances.
- 8. "Value of Other Assets and Equipment" should include the actual or estimated value of items such as office 'equipment (computers/furnishings), moving equipment (hand trucks/blankets/strapping), and trailers.
- "Other Liabilities or Debts" means specific amounts/balances which the Company/Business applying for a Certificate
 knows that it owes to other persons or companies; for example Franchise Fees. This does NOT include regular bills
 such as electricity bills, security system costs, insurance, salaries, etc.

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PROPOSED RATES AND CHARGES FOR SERVICE

Proposed Rates and Charges:

\$ 8.00 an hour

.82 per mile: Administrative fee

Proposal \$11300. per week

Requested Scope of Authority: Check all counties in which you are requesting permission to operate. You will only be allowed to operate in those counties checked below. You may request "Statewide" authority if you intend to operate in all counties in South Carolina.

Abbeville

Cherokee	V Florence

Saluda

Aiken

Chester	
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Spartanburg

Allendale

Chesterfield

Sumter

Union

Anderson

Clarendon	

 IMMITTALI
 McCormick
MICCOLLINGA

Williamsburg

Barnwell

Bamberg

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٠Z'	Bari	lin	oton	

Γ	╗	Vork	

Beaufort

	1	
/	Dillon	

Colleton

Berkeley

Statewide

Calhoun

Fairfield

Picken		-	Pickens
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Charleston

_	Richland
	10001010

DESCRIPTION OF EQUIPMENT

You are not required to own a vehicle to file an application. However, prior to being issued a certificate by ORS, you will be required to have obtained a vehicle.

Maximum Number of Passengers Vehicle is Equipped to Carry: (The number of passengers a vehicle is equipped to carry is based on the number of <u>seatbelts</u> in the vehicle, including the driver's seatbelt.)

1-7 Passengers, including driver

8-15 Passengers, including driver

MAKE	YEAR & MODEL	VI N#	EMPTY WEIGHT	WHEEI CHAIR LIFT
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INSURANCE QUOTE

This form	MIIST	RE	ഗവ	APT.	RTED
LINS JUNE		1112			

INSURANCE QUOTE	ACCEPTED				
This form MUST BE COMPLETED. The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy insurance policies may be required. Do not provide a copy of insurance policies unless requested. You will not be required purchase insurance until your application has been approved and an order has been issued by the PSC. THIS IS ONLY approved and an order has been issued by the PSC.	of current R				
The following insurance quote is for:	C E S				
Millie LIDYd	SIN O				
Name of Applicant					
4216 Sinclair Rd Dillon SC 29536	2018				
Address of Applicant					
Amount of Premium: Liability Insurance \$ 2399	ау 30 7:17				
The above quoted premium is for a term of months. Minimum Limits - Bodily injury and property damage limits will not be less than the following: Limits Quoted					
Liability Combined Each Occurance \$ 1,000,000	—— S				
Liability Combined Each Occurance \$ 1,000,000 Medical Payments per Person \$ 1,000	- 20				
Columbia Insurance Company P.D. BK 55 Latta SC 29565 Home Office Address of Company	- 2018 May 30 7:17 AM - SCPSC - 2018-172-T - Page 6 of 10				

I, the Applicant, am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

If you wish to self-insure your motor vehicles for liability and property damage, you must comply with S.C. Code Ann. Sections 56-9-60 and 58-23-910. For more information, contact the Department of Motor Vehicles at (803) 896-8457 or (803) 896-9903.

If you wish to apply as a self-insured for worker's compensation coverage in South Carolina you may do so with the South Carolina Worker's Compensation Commission (WCC) provided that you will be able to: 1) post a surety bond or letter-ofcredit with the WCC for a minimum of \$500,000, 2) agree to pay a yearly self-insurance tax, and 3) agree to pay an annual assessment to the South Carolina Second Injury Fund. For more information, contact the WCC Self-Insurance Division at (803) 737-5712 or on the web at www.wcc.state.sc.us/self-insurance.

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Exhibit Fit, Willing, and Able (FWA)

,	Millie Lloyd		<u> </u>		
	Willing Croys		Name		
_	U.S.D.	O.T No.		ICC No.	
1.	Is there currently any of	ntstanding judgmen	ts against the Applic	cant?	
	○ Yes	O No			
	If Yes, indicate nature	of judgement(s) aga	ainst applicant.		
	•		•		
				•	
			•		
	M.				
	•	•			
	•				
	•		•		
2.	Is Applicant familiar wi carrier operations in Sou statutes and regulations	nth South Carolina,	egulations, including and does Applicant	safety regulations and go agree to operate in compli	verning for-hire motor ance with these
	O Yes	○ No			
		•			
3.	Is Applicant aware of the	e Commission's in	surance requirement	s and the insurance premiu	m costs associated
	○ Yes	1 No			
			•		

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Exhibit on Driver Qualifications

Applicant understands that drivers must possess at least a current American Red Cross Standard First Aid and CPR Certificate or its equivalent, and records that verify/record such training must be kept on file at the company's primary place of of business within South Carolina.

Yes

No

Yes

No

No

3. Applicant understands that drivers must be trained in the use of all vehicle installed safety equipment such as two-way radios, first-aid kits, fire extinguishers, and other equipment as outlined in PSC Regulations.

⊘ Yes · ○ No

4. Applicant understands that drivers must be able to physically perform actions necessary to assist persons with disabilities, including wheelchair users.

© Yes O No

 Applicant understands that drivers must wear a professional uniform and photo identification badge that easily identifies the driver and the company for whom the driver works.

Yes O No

5. Applicant understands that drivers must complete twelve (12) hours of in-service training annually in the area of safety, and records that verify/record such training must be kept on file at the company's primary place of business within South Carolina.

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PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 EXECUTIVE CENTER DRIVE, SUITE 100 COLUMBIA, SOUTH CAROLINA 29210

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (S.C. Code Ann. Regs., 1976), and R.38-400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 2, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

S.C. Code Ann. Section 58-3-250 states, in part, that every final order of the Commission must be served by electronic service, registered or certified mail, upon the parties to the proceeding or their attorneys.

Please check the applicable box:

The Applicant AGREBS to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System. The Applicant authorizes the Commission to serve its orders by using the email address as it appears on page one of this Application. To sign up for eService notifications, please visit www.psc.sc. gov to create a My DMS account.

The Applicant DOES NOT AGREE to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System.

The Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

Willie Hloye
Applicant's Signature

Title of Applicant (e.g. President, Owner, etc.)

STATE OF SOUTH CAROLINA

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Notary Public

Commission Expires (Commission Expires April 20, 200

This is what Hention:

Services

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